

TEXAS DEPARTMENT OF STATE HEALTH SERVICES  
RADIATION SAFETY LICENSING BRANCH  
P.O. Box 149200, ZZ113-120  
Austin, TX 78714-9200

ZZ113-120

|                     |       |
|---------------------|-------|
| FOR AGENCY USE ONLY |       |
| ID No.:             | _____ |
| Staff Initials      | _____ |
| TOTAL:              | _____ |

**RADIOGRAPHER QUALIFICATION**

**INSTRUCTIONS:** Complete all sections. Mail the original and \$100.00 nonrefundable fee, payable to DSHS, to the above address. **Incomplete or incorrect forms will be returned.**

**CHECK ONE:**     Radioactive Materials Only     X-Ray Machines Only     Both

**PLEASE TYPE OR PRINT LEGIBLY**

**I. PERSONAL DATA**

Full Name \_\_\_\_\_  
Last
First
Middle

Date of Birth \_\_\_\_\_ Social Security No. \_\_\_\_\_  
(MM/DD/YY)

**II. ON-THE-JOB TRAINING (OJT) [25 TAC §289.255(m)(2)(A)(ii)]**

Use the back of this form to document at least 200 hours for radioactive materials and/or 120 hours for x-ray machines beginning with the OJT start date listed on the trainee status card.

If the radiographer has a minimum of one year radiography experience with a company outside of Texas, submit BRC Form 255-OS.

**III. ADDITIONAL QUALIFICATION REQUIREMENTS [25 TAC §289.255(n)(1)]**

If currently working for a radiography company, you must complete this section, and the RSO must sign this form.

Company Name \_\_\_\_\_

Co. Phone No. \_\_\_\_\_ Co. License/Registration No. \_\_\_\_\_

Co. Mailing Address \_\_\_\_\_  
Street
City
State
Zip

Completed written or oral exam given by licensee/registrant covering topics in §289.255 (n)(1)(A) on \_\_\_\_\_  
(MM/DD/YY)

Demonstrated competence using this company's sources of radiation on \_\_\_\_\_  
(MM/DD/YY)

**IV. CERTIFICATION**

I certify the above information is correct to the best of my knowledge.

\_\_\_\_\_  
Signature of Radiographer Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Radiation Safety Officer (RSO)

\_\_\_\_\_  
Printed or Typed Name of RSO

|   |
|---|
| <p><b>PRIVACY NOTIFICATION:</b> If you are applying as an individual, with few exceptions, you have the right to request and be informed about information that the State of Texas collects about you. You are entitled to receive and review the information upon request. You also have the right to ask the state agency to correct any information that is determined to be incorrect. See <a href="http://www.dshs.state.tx.us.policy/privacy.shtml">http://www.dshs.state.tx.us.policy/privacy.shtml</a> for more information on Privacy Notification. (Reference: Government Code, Section 552.021, 552.023, 559.003 and 559.004.)</p> |
|---|

## ON-THE-JOB TRAINING RECORD

### E X A M P L E

| Dates of<br>*On-The-Job<br>Training<br>(mm/dd/yy) | Number<br>of<br>Hours Per Day<br>(RAM/X-Ray) | Name the<br>Equipment Manufacturer                               | Printed Name of Trainer/Instructor |
|---|--|--|------------------------------------|
|   |  |  | Signature of Trainer/Instructor    |
| 01/01/04  | 6 hours<br>2 hours                           | <i>Amersham, INC, SPEC, etc.<br/>Balteau, XMAS, Sperry, etc.</i> | <i>Pat Riley</i>                   |
|   |  |  | <i>(Pat Riley's Signature)</i>     |

To qualify as a radiographer, document (in hours) your training as a trainee. Use additional copies of this page as necessary. Each day of OJT must be entered separately.

| Dates of<br>*On-The-Job<br>Training<br>(mm/dd/yy) | Number<br>of<br>Hours Per Day<br>(RAM/X-Ray) | Name the<br>Equipment Manufacturer | Printed Name of Trainer/Instructor |
|---|--|------------------------------------|------------------------------------|
|   |  |                                    | Signature of Trainer/Instructor    |
|   |  |                                    |                                    |
|   |  |                                    |                                    |
|   |  |                                    |                                    |
|   |  |                                    |                                    |
|   |  |                                    |                                    |
|   |  |                                    |                                    |
|   |  |                                    |                                    |
|   |  |                                    |                                    |
|   |  |                                    |                                    |
|   |  |                                    |                                    |

\*On-the-job training includes the use of sources of radiation, performance of radiation surveys and radiation safety related activities. On-the-job training does not include film development and interpretation, darkroom activities, travel, safety meetings, classroom training and/or the use of cabinet x-ray units.